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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *no*  
*no* *NE*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *no*  
*no* *NE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 14	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 7
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35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged *[Signature]* Examiner's Signature *[Initials]*

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TITLE  
 Authentication method and system

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